(c) the total number of beds as on date and whether there is any proposal to increase their numbers and if not, the reasons therefor; and

(d) the steps proposed to be taken to improve the quality of medical care in Safdarjung Hospital to reduce the load of AIIMS?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) In the Casualty/Emergency life saving situations all efforts are made to admit the seriously ill and injured patients. In case of non-availability of beds, such patients are accommodated in the other beds available in the Hospital. However, in case of even non-availability of other beds, patients are normally referred to other Government Hospitals for admission and continuation of treatment through AIIMS Ambulance

(c) As on 30.04.2006, the sanctioned bed strength at AIIMS is 1995. The increase in bed strength is a continuous ongoing process and depend upon patient load, availability of resources, etc.

(d) While steps are taken to upgrade the infrastructural facilities at Safdarjung Hospital, the Government has also drawn up the Pradhan Mantri Swasthya Suraksha Yojana (PMSSY), for setting up six Super Specialty AIIMS like Institutons in under-served areas with a view to reducing patient load, as substantial number of patients at AIIMS come from these under-served States. It is also proposed to upgrade some of the existing Government Medical Colleges/Institutions to the level of AIIMS.

Refusal of treatment to CGHS beneficiaries

2357. SHRI TARIQ ANWAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the names of the Central Government Hospitals in Delhi in which CGHS beneficiaries are treated separately;

(b) whether it is a fact that Doctors refuse to treat the CGHS patients if their cases are not referred by the CGHS dispensaries.

(c) if so, what are the reasons therefor; and

(d) what are the remedical steps Government are taking in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) The Central Govt. Hospitals in Delhi in which CGHS beneficiaries are treated separately are:—

1. Safdarjung Hospital

2. Dr. R.M.L. Hospital

(b) and (c) The CGHS beneficiaries with basic pay of Rs. 12,000/- + DP, *i.e.* Rs. 18,000/- and above can consult the doctor in the above two hospitals directly after taking appointment. Other patients are referred by the concerned dispensaries, but no patient is refused by the doctor in the hospitals even he/she comes without referral.

(d) In view of reply to parts (b) & (c) the question does not arise.

Burden Disease Study By ICMR

2358. SHRI THANGA TAMIL SELVAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Indian Council of Medical Research had conducted a study known as Burden Disease Study;

(b) is so, the details thereof; and

(c) the steps taken to prevent the burden disease projection of the study?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) The Indian Council of Medical Research (ICMR) supported by world Helath Organization (WHO) undertook a study on assessment of Burden of Non-Communicable Diseases (NCDs) using secondary data in 2003-04. The study utilized the existing prevalence/incidence estimates and employed the Global Disease Burden to arrive at disease burden indices of major non-communicable diseases like cancer, stroke, ischemic heart disease, diabetes and risk factors i.e. use of tobacco and hypertension.

Details of burden of disease indices estimate for Ischemic Heart Disease (IHD), stroke, diabetes and cancer during the year 2004 are given in table No. 1 and 2 respectively: